

## 2018 DAHLGREN SHARKS SWIM TEAM MEMBERSHIP APPLICATION

SWIMMERS' INFORMATION				
Last:		First:		MI:
Age:	DOB:	Gender:	Weight:	
Status of Immunizations:		Drug Allergies:		
Chronic conditions and or illness: (e.g. Seizures, Allergies, Sting, Diabetes, Asthma, etc.)?		Regular medications?		
YES	NO	YES	NO	
Please list if Yes:		Please list if Yes:		
Last:		First:		MI:
Age:	DOB:	Gender:	Weight:	
Status of Immunizations:		Drug Allergies:		
Chronic conditions and or illness: (e.g. Seizures, Allergies, Sting, Diabetes, Asthma, etc.)?		Regular medications?		
YES	NO	YES	NO	
Please list if Yes:		Please list if Yes:		
PARENTS' / LEGAL GUARDIAN INFORMATION				
Mother's Name:		Father's Name:		
Mother's Address:		Father's Address:		
Mother's Cell Phone:		Father's Cell Phone:		
Mother's Home Phone:		Father's Home Phone:		
Mother's Email Address:		Father's Email Address:		
PHYSICIAN'S INFORMATION				
Physician's Name:		Physician's Phone:		
MEDICAL INSURANCE INFORMATION				
Medical Insurance Provider:		Policy #:		
EMERGENCY CONTACTS (If parents cannot be reached)				
Name:		Phone:	Relationship:	
Name:		Phone:	Relationship:	

**ADDITIONAL SWIMMER(S) FORMS ATTACHED? YES OR NO**

**MEDICAL/HEALTH PROBLEMS:**

**PARENT/GUARDIAN CONSENT AND UNDERSTANDING**

A representative of the Dahlgren Sharks has my permission to seek emergency medical aid for my child(ren) as listed on this form in the event that I cannot be contacted.

All medical insurance covering the child(ren) must be provided by parent(s) or guardian(s).

Participation in the RSL insurance program is mandatory, and all associated costs are included in membership fees.

All fees of membership for the Dahlgren Sharks are required on or before the first day of the child(ren)'s practice.

To the best of my knowledge all information on this form is complete and accurate. I will not hold Dahlgren Sharks, the YMCA, or the coaches responsible in case of accident or injury as a result of participation in this program. I understand the risks involved with this activity and know that my children are physically able to participate in this program.

I hereby give my consent and approval for my child(ren) to participate in this activity.

Name of Child(ren) participating:

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Parent / Legal Guardian Signature and Date

# WAIVER/RELEASE OF LIABILITY

The enrolled participant and the parent/guardian of the participant (if the participant is under the age of 18), agree and understand that swimming is a HIGH RISK ACTIVITY. I recognize that there are risks inherent in the sport of swimming, which could result in (but not limited too) paralyzing injuries and death.

The participant hereby agrees to participate in the Rappahannock Swim League program and hereby agrees to indemnify and hold harmless the Rappahannock Swim League, Inc., its coaches, officers, directors, agents, volunteers, and employees, including its swim team and their respective coaches, officers, directors, agents, volunteers and employees against any liability resulting in injury that may occur to the participant while participating in the Rappahannock Swim League program. The participant also agree to indemnify the Rappahannock Swim League Swim League Inc., and the \_\_\_\_\_ Swim Team from any liabilities, demands, claims, or law suits arising from the actions or inactions of the participant.

The participant and the parent/guardian of the participant authorize any representative of the Rappahannock Swim League, Inc. or the \_\_\_\_\_ Swim Team to have the participant treated in any medical emergency during their participation in the Rappahannock Swim League Program. Further, the participant and the parent/guardian agree to pay all the costs associated with medical care and transportation of the participant.

I have noted below any medical/health problems of which the staff should be aware.

SWIMMER #1 NAME: \_\_\_\_\_

Medical/Health Conditions: \_\_\_\_\_

SWIMMER #2 NAME: \_\_\_\_\_

Medical/Health Conditions: \_\_\_\_\_

SWIMMER #3 NAME: \_\_\_\_\_

Medical/Health Conditions: \_\_\_\_\_

SWIMMER #4 NAME: \_\_\_\_\_

Medical/Health Conditions: \_\_\_\_\_

**I HAVE CAREFULLY READ THE ABOVE LIABILITY RELEASE AND SIGNED IT WITH FULL KNOWLEDGE OF ITS CONTENTS AND SIGNIFICANCE.**

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_

PARENT/GUARDIAN PRINTED NAME: \_\_\_\_\_

DATE: \_\_\_\_\_



Participant Release, Waiver, Indemnity and Covenant Not to Sue

**King George Family YMCA  
Dahlgren Sharks Swim Team 2018**

NOTICE: THIS IS A LEGALLY BINDING AGREEMENT. By signing this agreement, you give up your right to bring a court action to recover compensation or obtain any other remedy for any injury to your child or your property or for the death of your child, however caused arising out of your child's participation in the Learn to Swim Program at the King George Family YMCA ("YMCA"), (the "Program"), now or any time in the future.

**Acknowledgment of Risk**

I, the undersigned parent or legal guardian of (printed name of child) \_\_\_\_\_ ('my child'), HEREBY ACKNOWLEDGE AND AGREE that the Program has inherent risks. I have full knowledge of the nature and extent of all the risks associated with my child's participation in the Program.

**Release, Waiver, Indemnity and Covenant Not to Sue**

In consideration of my child's participation in the Program I, the undersigned parent of legal guardian of my child, agree to release and on behalf of my child, myself, my heirs, representatives, executors, administrators, and assigns, HEREBY DO RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the YMCA, its directors, officers, agents, volunteers and employees (hereinafter referred to as "releasees") from any cause of action, claim, or demand of any nature whatsoever, including but not limited to, a claim of negligence, which I, my child, my heirs, representatives, executors, administrators and assigns may now have, or have in the future against the releasees on account of personal injury, property damage, death or accident of any kind, arising out of or in any way related to my child's participation in the Program whether supervised or unsupervised, however the injury or damage is caused, including, but not limited to the negligence of the releasees.

In consideration of my child's participation in the program, I, the undersigned parent or legal guardian of my child, agree to INDEMNIFY, DEFEND, SAVE AND HOLD HARMLESS the releasees from any and all causes of action, claims, demands, losses, or costs of any nature whatever arising out of or in any way related to my child's participation in the program.

I hereby certify that I have full knowledge of the nature and extent of the risks inherent in my child's participation in the program and that I am voluntarily assuming the risks. I understand that I will be solely responsible for any loss or damage, including death, sustained by my child while participating in the program and that by this agreement the YMCA is released from any and all liability for such loss, damage, or death.

I further certify that my child is in good health and that my child has no physical limitations which would preclude my child's safe participation in the program.

The UNDERSIGNED acknowledges that the King George Family YMCA is a charitable non-profit organization organized under the laws of the State of Virginia and nothing in this agreement shall be construed as a waiver of charitable non-profit status and/or benefits under Virginia law.

\_\_\_\_\_  
Signature of parent or legal guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of parent or legal guardian

## **ELECTRONIC COMMUNICATIONS AND SOCIAL MEDIA POLICY**

As part of Dahlgren Sharks emphasis on athlete safety, all electronic communications between a coach and athlete must be professional in nature and for the purpose of communicating information about team activities.

**As with any communication, the content of any electronic communication should be readily available to share with the athlete's family. At the request of a parent or guardian, any email, electronic text, social media or similar communication will copy or include the athlete's parents or guardians.**

### **FACEBOOK, BLOGS AND SIMILAR SITES**

Coaches may not have athletes of Dahlgren Sharks join a personal social media page. Athlete members and parents can view the official Shark's Team page and coaches can communicate to athlete members through the site. All posts, messages, texts, or media of any kind between coach and athlete must be professional in nature and for the purpose of communicating information about team activities or for team-oriented motivational purposes.

### **TWITTER, INSTANT MESSAGING AND SIMILAR MEDIA**

These are not appropriate communications between Dahlgren Sharks Coaches and Athletes.

### **EMAIL AND SIMILAR ELECTRONIC COMMUNICATIONS**

Athletes and coaches may use email to communicate. All email content between coach and athlete must be professional in nature and for the purpose of communicating information about team activities. Any email sent to individual assistant coaches will be forwarded to the Dahlgren Sharks board, where the coach is a staff member and/or volunteer.

### **TEXTING AND SIMILAR ELECTRONIC COMMUNICATIONS**

Texting is discouraged between coaches and athletes and should be used only in an emergency.

### **ELECTRONIC IMAGERY**

From time to time, digital photos, videos of practice or competition, and other publicly obtainable images of the athlete – individually or in groups – may be taken. These photos and/or videos may be submitted to local, state or national publications, used in club videos, posted on club or club associated websites, or offered to the club families seasonally on disc or other electronic form. It is the default policy of Dahlgren Sharks to allow such practices as long as the athlete or athletes are in public view and such imagery is both appropriate and in the best interest of the athlete and the club.

### **REQUEST TO DISCONTINUE ALL ELECTRONIC COMMUNICATIONS OR IMAGERY**

The parents or guardians of an athlete may request in writing that their child not be contacted by any form of electronic communication by coaches (photography or videography).

### **MISCONDUCT**

Social media and electronic communications can also be used to commit misconduct (e.g., emotional, sexual, bullying, harassment, and hazing). Such communications by coaches, staff, volunteers, administrators, officials, parents or athletes will not be tolerated and are considered violations of USA Swimming Code of Conduct.

### **VIOLATIONS**

Violations of Dahlgren Sharks' Electronic Communications and Social Media Policy should be reported to a coach or the board.

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Parent / Legal Guardian Signature and date

# Swim Meets Volunteering

Swim meets require many parent volunteers to assist in the preparation, running, and cleaning up. Each family is asked to have one adult participate in an assignment at each meet. We realize that you may not have a swim background, but there are tasks that are essential that require little swim knowledge. Some tasks do require training, and we have a core of experienced people ready to offer you an opportunity to learn. Key positions require attendance at one formal clinic offered by the RSL. These clinics are held in the Fredericksburg area. Positions which require formal training are marked with an asterisk.

I understand and acknowledge that my family will provide a swim meet volunteer for at least 6 times during the course of the season.

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Parent / Legal Guardian Signature and date

## 2018 Sharks Fees Collected Sheet

1 <sup>st</sup> Child	\$120	_____
2 <sup>nd</sup> Child	\$95	_____
3 <sup>rd</sup> Child	\$65	_____
4 <sup>th</sup> or more	\$25 each	_____

Registration Fee \$25.00 per swimmer  
 (Includes swim cap, t-shirt, and Insurance) \_\_\_\_\_

Additional 3% if paying with credit card \_\_\_\_\_

Total Paid \_\_\_\_\_

(Cash \_\_\_ Credit Card \_\_\_ Check# \_\_\_\_\_)

Swimmer(s) Names and T-shirt size:

Name	T-shirt size
	Youth Small <input type="checkbox"/> Youth Medium <input type="checkbox"/> Youth Large <input type="checkbox"/> Youth XL <input type="checkbox"/> Adult Small <input type="checkbox"/> Adult Medium <input type="checkbox"/> Adult Large <input type="checkbox"/> Adult XL <input type="checkbox"/>
	Youth Small <input type="checkbox"/> Youth Medium <input type="checkbox"/> Youth Large <input type="checkbox"/> Youth XL <input type="checkbox"/> Adult Small <input type="checkbox"/> Adult Medium <input type="checkbox"/> Adult Large <input type="checkbox"/> Adult XL <input type="checkbox"/>
	Youth Small <input type="checkbox"/> Youth Medium <input type="checkbox"/> Youth Large <input type="checkbox"/> Youth XL <input type="checkbox"/> Adult Small <input type="checkbox"/> Adult Medium <input type="checkbox"/> Adult Large <input type="checkbox"/> Adult XL <input type="checkbox"/>
	Youth Small <input type="checkbox"/> Youth Medium <input type="checkbox"/> Youth Large <input type="checkbox"/> Youth XL <input type="checkbox"/> Adult Small <input type="checkbox"/> Adult Medium <input type="checkbox"/> Adult Large <input type="checkbox"/> Adult XL <input type="checkbox"/>
	Youth Small <input type="checkbox"/> Youth Medium <input type="checkbox"/> Youth Large <input type="checkbox"/> Youth XL <input type="checkbox"/> Adult Small <input type="checkbox"/> Adult Medium <input type="checkbox"/> Adult Large <input type="checkbox"/> Adult XL <input type="checkbox"/>

**\*\*\*Additional Sharks gear available for order on separate form\*\*\***

Parent(s) / Legal Guardian Names: \_\_\_\_\_  
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